

Fill in this information to identify the case:Debtor name NB Vue Mac DSTUnited States Bankruptcy Court for the: SOUTHERN DISTRICT OF TEXASCase number (if known) 21-32291☐ Check if this is an amended filing**Official Form 206A/B****Schedule A/B: Assets - Real and Personal Property**

12/15

Disclose all property, real and personal, which the debtor owns or in which the debtor has any other legal, equitable, or future interest. Include all property in which the debtor holds rights and powers exercisable for the debtor's own benefit. Also include assets and properties which have no book value, such as fully depreciated assets or assets that were not capitalized. In Schedule A/B, list any executory contracts or unexpired leases. Also list them on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G).

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. At the top of any pages added, write the debtor's name and case number (if known). Also identify the form and line number to which the additional information applies. If an additional sheet is attached, include the amounts from the attachment in the total for the pertinent part.

For Part 1 through Part 11, list each asset under the appropriate category or attach separate supporting schedules, such as a fixed asset schedule or depreciation schedule, that gives the details for each asset in a particular category. List each asset only once. In valuing the debtor's interest, do not deduct the value of secured claims. See the instructions to understand the terms used in this form.

Part 1: Cash and cash equivalents**1. Does the debtor have any cash or cash equivalents?**☐ No. Go to Part 2.☒ Yes Fill in the information below.**All cash or cash equivalents owned or controlled by the debtor****Current value of debtor's interest****3. Checking, savings, money market, or financial brokerage accounts (Identify all)**

Name of institution (bank or brokerage firm)

Type of account

Last 4 digits of account number

3.1. Citizens Community BankOperating7614\$99,011.813.2. Citizens Community BankSecurity Deposits7665\$1,739.383.3. Citizens Community BankDistributions1972\$560.983.4. Citizens Community BankSources1778\$90.59**4. Other cash equivalents (Identify all)****5. Total of Part 1.**

Add lines 2 through 4 (including amounts on any additional sheets). Copy the total to line 80.

\$101,402.76**Part 2: Deposits and Prepayments****6. Does the debtor have any deposits or prepayments?**☐ No. Go to Part 3.☒ Yes Fill in the information below.**7. Deposits, including security deposits and utility deposits**

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Description, including name of holder of deposit

8. **Prepayments, including prepayments on executory contracts, leases, insurance, taxes, and rent**
Description, including name of holder of prepayment

8.1. **Insurance Escrow - Fannie Mae** **\$110,678.28**

8.2. **Tax Escrow - Fannie Mae** **\$203,059.23**

9. **Total of Part 2.**

Add lines 7 through 8. Copy the total to line 81.

\$313,737.51**Part 3: Accounts receivable**10. **Does the debtor have any accounts receivable?**

- ☒ No. Go to Part 4.
☐ Yes Fill in the information below.

Part 4: Investments13. **Does the debtor own any investments?**

- ☒ No. Go to Part 5.
☐ Yes Fill in the information below.

Part 5: Inventory, excluding agriculture assets18. **Does the debtor own any inventory (excluding agriculture assets)?**

- ☒ No. Go to Part 6.
☐ Yes Fill in the information below.

Part 6: Farming and fishing-related assets (other than titled motor vehicles and land)27. **Does the debtor own or lease any farming and fishing-related assets (other than titled motor vehicles and land)?**

- ☒ No. Go to Part 7.
☐ Yes Fill in the information below.

Part 7: Office furniture, fixtures, and equipment; and collectibles38. **Does the debtor own or lease any office furniture, fixtures, equipment, or collectibles?**

- ☐ No. Go to Part 8.
☒ Yes Fill in the information below.

| General description | Net book value of debtor's interest (Where available) | Valuation method used for current value | Current value of debtor's interest |
|--|--|---|------------------------------------|
| 39. Office furniture Furnishings for apartments, common areas and management office, and appliances in apartments | Unknown | Recent cost | \$607,353.89 |

40. **Office fixtures**41. **Office equipment, including all computer equipment and**

Debtor **NB Vue Mac DST**
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Office equipment, computers, and
communications equipment****Unknown****Unknown**

42. **Collectibles** *Examples:* Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; china and crystal; stamp, coin, or baseball card collections; other collections, memorabilia, or collectibles

43. **Total of Part 7.**

Add lines 39 through 42. Copy the total to line 86.

\$607,353.8944. **Is a depreciation schedule available for any of the property listed in Part 7?**

- ☒ No
☐ Yes

45. **Has any of the property listed in Part 7 been appraised by a professional within the last year?**

- ☒ No
☐ Yes

Part 8: Machinery, equipment, and vehicles46. **Does the debtor own or lease any machinery, equipment, or vehicles?**

- ☒ No. Go to Part 9.
☐ Yes Fill in the information below.

Part 9: Real property54. **Does the debtor own or lease any real property?**

- ☐ No. Go to Part 10.
☒ Yes Fill in the information below.

55. **Any building, other improved real estate, or land which the debtor owns or in which the debtor has an interest****Description and location of property**

Include street address or other description such as Assessor Parcel Number (APN), and type of property (for example, acreage, factory, warehouse, apartment or office building, if available).

55.1. **4460 S. MacGregor
Way, Houston, TX,
77021****Nature and extent of debtor's interest in property****Fee simple****Net book value of debtor's interest (Where available)****Unknown****Valuation method used for current value****Appraisal (2015)****Current value of debtor's interest****\$36,300,000.00**56. **Total of Part 9.**

Add the current value on lines 55.1 through 55.6 and entries from any additional sheets. Copy the total to line 88.

\$36,300,000.0057. **Is a depreciation schedule available for any of the property listed in Part 9?**

- ☒ No
☐ Yes

58. **Has any of the property listed in Part 9 been appraised by a professional within the last year?**

- ☒ No
☐ Yes

Part 10: Intangibles and intellectual property59. **Does the debtor have any interests in intangibles or intellectual property?**

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- ☐ No. Go to Part 11.
- ☒ Yes Fill in the information below.

| General description | Net book value of debtor's interest (Where available) | Valuation method used for current value | Current value of debtor's interest |
|---|--|---|------------------------------------|
| 60. Patents, copyrights, trademarks, and trade secrets | | | |
| 61. Internet domain names and websites <u>vuecollegeliving.com</u> | <u>Unknown</u> | | <u>Unknown</u> |
| 62. Licenses, franchises, and royalties | | | |
| 63. Customer lists, mailing lists, or other compilations <u>Mailing lists - enrolled students and/or prospective tenants</u> | <u>Unknown</u> | | <u>Unknown</u> |
| 64. Other intangibles, or intellectual property | | | |
| 65. Goodwill | | | |
| 66. Total of Part 10. Add lines 60 through 65. Copy the total to line 89. | | | <u>\$0.00</u> |
| 67. Do your lists or records include personally identifiable information of customers (as defined in 11 U.S.C. §§ 101(41A) and 107?) <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | | | |
| 68. Is there an amortization or other similar schedule available for any of the property listed in Part 10? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | | | |
| 69. Has any of the property listed in Part 10 been appraised by a professional within the last year? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | | | |

Part 11: All other assets

70. **Does the debtor own any other assets that have not yet been reported on this form?**
Include all interests in executory contracts and unexpired leases not previously reported on this form.

- ☐ No. Go to Part 12.
- ☒ Yes Fill in the information below.

| | | Current value of debtor's interest |
|---|----------------------|------------------------------------|
| 71. Notes receivable Description (include name of obligor) | | |
| 72. Tax refunds and unused net operating losses (NOLs) Description (for example, federal, state, local) | | |
| <u>Appeal of property taxes - Harris County (pending)</u> | Tax year <u>2020</u> | <u>Unknown</u> |
| 73. Interests in insurance policies or annuities | | |
| 74. Causes of action against third parties (whether or not a lawsuit has been filed) | | |

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75. **Other contingent and unliquidated claims or causes of action of every nature, including counterclaims of the debtor and rights to set off claims**

76. **Trusts, equitable or future interests in property**

77. **Other property of any kind not already listed** *Examples: Season tickets, country club membership*

78. **Total of Part 11.**

Add lines 71 through 77. Copy the total to line 90.

 \$0.00

79. **Has any of the property listed in Part 11 been appraised by a professional within the last year?**

☒ No
☐ Yes

Debtor **NB Vue Mac DST**
NameCase number (If known) **21-32291****Part 12: Summary**

In Part 12 copy all of the totals from the earlier parts of the form

| Type of property | Current value of personal property | Current value of real property |
|---|------------------------------------|--------------------------------------|
| 80. Cash, cash equivalents, and financial assets. <i>Copy line 5, Part 1</i> | <u>\$101,402.76</u> | |
| 81. Deposits and prepayments. <i>Copy line 9, Part 2.</i> | <u>\$313,737.51</u> | |
| 82. Accounts receivable. <i>Copy line 12, Part 3.</i> | <u>\$0.00</u> | |
| 83. Investments. <i>Copy line 17, Part 4.</i> | <u>\$0.00</u> | |
| 84. Inventory. <i>Copy line 23, Part 5.</i> | <u>\$0.00</u> | |
| 85. Farming and fishing-related assets. <i>Copy line 33, Part 6.</i> | <u>\$0.00</u> | |
| 86. Office furniture, fixtures, and equipment; and collectibles. <i>Copy line 43, Part 7.</i> | <u>\$607,353.89</u> | |
| 87. Machinery, equipment, and vehicles. <i>Copy line 51, Part 8.</i> | <u>\$0.00</u> | |
| 88. Real property. <i>Copy line 56, Part 9.....></i> | | <u>\$36,300,000.00</u> |
| 89. Intangibles and intellectual property. <i>Copy line 66, Part 10.</i> | <u>\$0.00</u> | |
| 90. All other assets. <i>Copy line 78, Part 11.</i> | + <u>\$0.00</u> | |
| 91. Total. Add lines 80 through 90 for each column | <u>\$1,022,494.16</u> | + 91b. <u>\$36,300,000.00</u> |
| 92. Total of all property on Schedule A/B. Add lines 91a+91b=92 | | <u>\$37,322,494.16</u> |

Fill in this information to identify the case:Debtor name **NB Vue Mac DST**United States Bankruptcy Court for the: **SOUTHERN DISTRICT OF TEXAS**Case number (if known) **21-32291**☐ Check if this is an amended filing**Official Form 206E/F****Schedule E/F: Creditors Who Have Unsecured Claims**

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Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

Part 1: List All Creditors with PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims? (See 11 U.S.C. § 507).

☐ No. Go to Part 2.☒ Yes. Go to line 2.

2. List in alphabetical order all creditors who have unsecured claims that are entitled to priority in whole or in part. If the debtor has more than 3 creditors with priority unsecured claims, fill out and attach the Additional Page of Part 1.

| | Total claim | Priority amount |
|--|---|----------------------------------|
| 2.1 Priority creditor's name and mailing address Harris County P.O. Box 922004 Houston, TX 77292 Date or dates debt was incurred 2020-2021 Last 4 digits of account number 3543 Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8) | As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | Unknown Unknown |

Part 2: List All Creditors with NONPRIORITY Unsecured Claims

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

| | Amount of claim |
|--|---|
| 3.1 Nonpriority creditor's name and mailing address ADT LLC/ADT Security Services 1501 Yamato Road Boca Raton, FL 33431 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$51.56 |
| 3.2 Nonpriority creditor's name and mailing address Affordable Quality Electric 7814 FULTON ST Houston, TX 77022-3605 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$230.15 |

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| 3.3 | Nonpriority creditor's name and mailing address All Season Carpet Care 14006 BLUE FALLS DR Sugar Land, TX 77498-1747 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$8,155.66 |
| 3.4 | Nonpriority creditor's name and mailing address American Elevator Inspections PO BOX 2709 Baytown, TX 77522 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$330.00 |
| 3.5 | Nonpriority creditor's name and mailing address Apartments.com 2563 COLLECTION CENTER DR Chicago, IL 60693 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$3,836.00 |
| 3.6 | Nonpriority creditor's name and mailing address Berkeley Point Capital, LLC One Beacon Street 14th Floor Boston, MA 02108 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | Unknown |
| 3.7 | Nonpriority creditor's name and mailing address BG Multifamily PO Box 660282 Dallas, TX 75266 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$11,297.30 |
| 3.8 | Nonpriority creditor's name and mailing address Blue Pine Construction Corp 4857 W 147TH ST STE D Hawthorne, CA 90250-6735 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$12,970.00 |
| 3.9 | Nonpriority creditor's name and mailing address Bryson, Amal Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$1,291.52 |
| 3.10 | Nonpriority creditor's name and mailing address Century Fire Protection Houston Inc PO BOX 419 Pinehurst, TX 77362-0419 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$4,614.00 |

| | | | |
|--------|--|------------------------|-----------------|
| Debtor | NB Vue Mac DST <small>Name</small> | Case number (if known) | 21-32291 |
|--------|--|------------------------|-----------------|

| | | | |
|-------------|---|---|--|
| 3.11 | Nonpriority creditor's name and mailing address City of Houston, Dept of Public Wor 1002 Wathing Ave 4th Floor Houston, TX 77002 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> \$148.20 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | |
| 3.12 | Nonpriority creditor's name and mailing address Coastal Compaction PO BOX 21167 Houston, TX 77226 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> \$3,346.16 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | |
| 3.13 | Nonpriority creditor's name and mailing address Collins, Kennedy Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> \$440.72 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | |
| 3.14 | Nonpriority creditor's name and mailing address Community Controls 2480 S 3850 W Suite A Salt Lake City, UT 84120 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,984.50 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | |
| 3.15 | Nonpriority creditor's name and mailing address Conservice, LLC PO Box 4696 Logan, UT 84323-4696 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> \$7,334.07 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | |
| 3.16 | Nonpriority creditor's name and mailing address Conservice, LLC (utilities) PO BOX 4696 Logan, UT 84323 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> \$73,878.29 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | |
| 3.17 | Nonpriority creditor's name and mailing address Cort Furniture Rental PO BOX 17401 Baltimore, MD 21297 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> \$71.54 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | |
| 3.18 | Nonpriority creditor's name and mailing address Def-Smith, Emerald Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> \$150.75 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | |

| | | | |
|--------|--|------------------------|-----------------|
| Debtor | NB Vue Mac DST <small>Name</small> | Case number (if known) | 21-32291 |
|--------|--|------------------------|-----------------|

3.19 Nonpriority creditor's name and mailing address

Digital Ignite LLC
1049 MORRISON DR
STE 201
Charleston, SC 29403-3875

Date(s) debt was incurred _____

Last 4 digits of account number _____

As of the petition filing date, the claim is: *Check all that apply.*

☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim: _____

Is the claim subject to offset? ☒ No ☐ Yes

\$8,000.00

3.20 Nonpriority creditor's name and mailing address

Entrata

Date(s) debt was incurred _____

Last 4 digits of account number _____

As of the petition filing date, the claim is: *Check all that apply.*

☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim: _____

Is the claim subject to offset? ☒ No ☐ Yes

\$982.98

3.21 Nonpriority creditor's name and mailing address

Fernandez, Estefania

Date(s) debt was incurred _____

Last 4 digits of account number _____

As of the petition filing date, the claim is: *Check all that apply.*

☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim: _____

Is the claim subject to offset? ☒ No ☐ Yes

\$1,684.50

3.22 Nonpriority creditor's name and mailing address

G.O. Plumbing Services, Inc.
13602 LUTHE RD
Houston, TX 77039-2818

Date(s) debt was incurred _____

Last 4 digits of account number _____

As of the petition filing date, the claim is: *Check all that apply.*

☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim: _____

Is the claim subject to offset? ☒ No ☐ Yes

\$870.52

3.23 Nonpriority creditor's name and mailing address

Gateman, Inc.
PO BOX 270160
Houston, TX 77277

Date(s) debt was incurred _____

Last 4 digits of account number _____

As of the petition filing date, the claim is: *Check all that apply.*

☐ Contingent
☐ Unliquidated
☒ Disputed

Basis for the claim: _____

Is the claim subject to offset? ☒ No ☐ Yes

Unknown

3.24 Nonpriority creditor's name and mailing address

GCS Backflow Services, Inc.
8524 Hwy 6 North #274
Houston, TX 77095

Date(s) debt was incurred _____

Last 4 digits of account number _____

As of the petition filing date, the claim is: *Check all that apply.*

☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim: _____

Is the claim subject to offset? ☒ No ☐ Yes

\$409.53

3.25 Nonpriority creditor's name and mailing address

Granite Telecommunications, LLC
P.O. Box 983119
Boston, MA 02298

Date(s) debt was incurred _____

Last 4 digits of account number _____

As of the petition filing date, the claim is: *Check all that apply.*

☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim: _____

Is the claim subject to offset? ☒ No ☐ Yes

\$291.63

3.26 Nonpriority creditor's name and mailing address

Grid
5526 RIDGEDALE AVE
Dallas, TX 75206-6014

Date(s) debt was incurred _____

Last 4 digits of account number _____

As of the petition filing date, the claim is: *Check all that apply.*

☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim: _____

Is the claim subject to offset? ☒ No ☐ Yes

\$5,728.79

| | | | |
|--------|--|------------------------|-----------------|
| Debtor | NB Vue Mac DST <small>Name</small> | Case number (if known) | 21-32291 |
|--------|--|------------------------|-----------------|

| | | | |
|------|--|--|--------------------|
| 3.27 | Nonpriority creditor's name and mailing address HD Supply Facilities Maintenance PO Box 509058 San Diego, CA 92150 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$13,474.57 |
| 3.28 | Nonpriority creditor's name and mailing address Hillhouse Power Solutions, Inc. 7164 CHELSEA DR North Richland Hills, TX 76180-1600 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$3,000.00 |
| 3.29 | Nonpriority creditor's name and mailing address Houston Fire & Security 15112 LEE RD STE 401 Humble, TX 77396-5402 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | Unknown |
| 3.30 | Nonpriority creditor's name and mailing address Inside Out Construction PO Box 840246 Houston, TX 77084 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$10,155.00 |
| 3.31 | Nonpriority creditor's name and mailing address IRIO, Inc. P.O. Box 2768 Frisco, TX 75034 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$400.52 |
| 3.32 | Nonpriority creditor's name and mailing address Jessica King Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$817.50 |
| 3.33 | Nonpriority creditor's name and mailing address Kirton McConkie PO BOX 45120 Salt Lake City, UT 84145-0120 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$4,683.50 |
| 3.34 | Nonpriority creditor's name and mailing address Landscapes USA 11849 Rim Rock Trail Austin, TX 78737 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$3,523.32 |

| | | | |
|--------|--|------------------------|-----------------|
| Debtor | NB Vue Mac DST <small>Name</small> | Case number (if known) | 21-32291 |
|--------|--|------------------------|-----------------|

| | | | |
|------|--|---|--------------------|
| 3.35 | Nonpriority creditor's name and mailing address Not Just Gates 3118 FM 528 RD PMB 264 Webster, TX 77598-4507 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$2,188.75 |
| 3.36 | Nonpriority creditor's name and mailing address O'Connor & Associates 2200 NORTH LOOP W STE 200 Houston, TX 77018 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$24,584.61 |
| 3.37 | Nonpriority creditor's name and mailing address PPG Architectural Coatings PO Box 676340 Dallas, TX 75267-6340 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$2,943.22 |
| 3.38 | Nonpriority creditor's name and mailing address Property Doctor Services LLC PO BOX 184 Houston, TX 77001-0184 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$36,112.40 |
| 3.39 | Nonpriority creditor's name and mailing address Refuse Specialists LLC PO BOX 845122 Los Angeles, CA 90084-5122 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$25.00 |
| 3.40 | Nonpriority creditor's name and mailing address Reliable Fire Protection 6319 TULSA RD Houston, TX 77092-6315 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$9,567.14 |
| 3.41 | Nonpriority creditor's name and mailing address Ricoh USA, Inc. PO BOX 660342 Dallas, TX 75266 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$1,743.07 |
| 3.42 | Nonpriority creditor's name and mailing address Ryan, LLC PO Box 848351 Dallas, TX 75284-8351 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$8,304.76 |

| | | | |
|--------|--|------------------------|-----------------|
| Debtor | NB Vue Mac DST <small>Name</small> | Case number (if known) | 21-32291 |
|--------|--|------------------------|-----------------|

3.43 Nonpriority creditor's name and mailing address

Single Digits, Inc.
4 Bedford Farms
Suite 210
Bedford, NH 03110

Date(s) debt was incurred _____

Last 4 digits of account number _____

As of the petition filing date, the claim is: *Check all that apply.*

☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim: _____

Is the claim subject to offset? ☒ No ☐ Yes

\$114,785.85

3.44 Nonpriority creditor's name and mailing address

Staples Advantage
PO Box 660409
Dallas, TX 75266-0409

Date(s) debt was incurred _____

Last 4 digits of account number _____

As of the petition filing date, the claim is: *Check all that apply.*

☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim: _____

Is the claim subject to offset? ☒ No ☐ Yes

\$242.95

3.45 Nonpriority creditor's name and mailing address

Terminix Commercial
PO Box 802155
Chicago, IL 60680-2131

Date(s) debt was incurred _____

Last 4 digits of account number _____

As of the petition filing date, the claim is: *Check all that apply.*

☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim: _____

Is the claim subject to offset? ☒ No ☐ Yes

\$478.46

3.46 Nonpriority creditor's name and mailing address

The Electrical Doctor Home Services
1601 Preston Rd
Pasadena, TX 77503

Date(s) debt was incurred _____

Last 4 digits of account number _____

As of the petition filing date, the claim is: *Check all that apply.*

☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim: _____

Is the claim subject to offset? ☒ No ☐ Yes

\$7,568.39

3.47 Nonpriority creditor's name and mailing address

The Sherwin-Williams Co.
5042 Trail Lake DR
Fort Worth, TX 76133-2028

Date(s) debt was incurred _____

Last 4 digits of account number _____

As of the petition filing date, the claim is: *Check all that apply.*

☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim: _____

Is the claim subject to offset? ☒ No ☐ Yes

\$1,465.79

3.48 Nonpriority creditor's name and mailing address

Vertti, Giancarlo

Date(s) debt was incurred _____

Last 4 digits of account number _____

As of the petition filing date, the claim is: *Check all that apply.*

☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim: _____

Is the claim subject to offset? ☒ No ☐ Yes

\$200.00

3.49 Nonpriority creditor's name and mailing address

Washington, Corben D.
806 Truman Street
Hollandale, MS 38748

Date(s) debt was incurred _____

Last 4 digits of account number _____

As of the petition filing date, the claim is: *Check all that apply.*

☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim: _____

Is the claim subject to offset? ☒ No ☐ Yes

\$289.97

3.50 Nonpriority creditor's name and mailing address

Waste Management
4897 Alpha Dr
Suite 150
Wixom, MI 48393

Date(s) debt was incurred _____

Last 4 digits of account number _____

As of the petition filing date, the claim is: *Check all that apply.*

☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim: _____

Is the claim subject to offset? ☒ No ☐ Yes

\$3,002.98

Debtor **NB Vue Mac DST**
NameCase number (if known) **21-32291**

| | | | |
|------|---|--|--------------------|
| 3.51 | Nonpriority creditor's name and mailing address WE Security Inc. 2470 S DAIRY ASHFORD RD # 103 Houston, TX 77077-5716 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$47,595.36 |
| 3.52 | Nonpriority creditor's name and mailing address Williams, Misty 12500 Barker Cypress #9304 Cypress, TX 77429 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$594.49 |
| 3.53 | Nonpriority creditor's name and mailing address Wilmar (Maintenance USA) PO BOX 404284 Atlanta, GA 30384 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | Unknown |
| 3.54 | Nonpriority creditor's name and mailing address Winstar Marketing PO Box 7231 Waco, TX 76714 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$900.03 |

Part 3: List Others to Be Notified About Unsecured Claims

4. List in alphabetical order any others who must be notified for claims listed in Parts 1 and 2. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors.

If no others need to be notified for the debts listed in Parts 1 and 2, do not fill out or submit this page. If additional pages are needed, copy the next page.

Name and mailing address

On which line in Part 1 or Part 2 is the related creditor (if any) listed?

Last 4 digits of account number, if any

Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims

5. Add the amounts of priority and nonpriority unsecured claims.

5a. Total claims from Part 1

5b. Total claims from Part 2

5c. Total of Parts 1 and 2
Lines 5a + 5b = 5c.

| Total of claim amounts | |
|------------------------|----------------------|
| 5a. | \$ <u>0.00</u> |
| 5b. + | \$ <u>446,746.00</u> |
| 5c. | \$ <u>446,746.00</u> |

Fill in this information to identify the case:Debtor name **NB Vue Mac DST**United States Bankruptcy Court for the: **SOUTHERN DISTRICT OF TEXAS**Case number (if known) **21-32291**☐ Check if this is an amended filing**Official Form 206G****Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If more space is needed, copy and attach the additional page, number the entries consecutively.**1. Does the debtor have any executory contracts or unexpired leases?**☐ No. Check this box and file this form with the debtor's other schedules. There is nothing else to report on this form.☒ Yes. Fill in all of the information below even if the contacts of leases are listed on *Schedule A/B: Assets - Real and Personal* (Official Form 206A/B).*Property***2. List all contracts and unexpired leases****State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**2.1. State what the contract or lease is for and the nature of the debtor's interest **Services Agreement**

State the term remaining

Initial termination at 7/31/2020 - automatic renewal for successive (1) year terms

List the contract number of any government contract

**Airwave Networks, Inc.
1997 Annapolis Exchange Pkwy.
Suite 300
Annapolis, MD 21401**2.2. State what the contract or lease is for and the nature of the debtor's interest **Service Agreement**

State the term remaining

Terminates - 3/1/2023

List the contract number of any government contract

**Coastal Compaction
2202 Kelley St.
Houston, TX 77026**2.3. State what the contract or lease is for and the nature of the debtor's interest **Commercial Account Form and Letter of Agency**

State the term remaining

Unknown

List the contract number of any government contract

**Granite Telecommunications, LLC
P.O. Box 983119
Boston, MA 02298**

Fill in this information to identify the case:Debtor name **NB Vue Mac DST**United States Bankruptcy Court for the: **SOUTHERN DISTRICT OF TEXAS**Case number (if known) **21-32291**☐ Check if this is an amended filing**Official Form 206H
Schedule H: Your Codebtors****12/15**

Be as complete and accurate as possible. If more space is needed, copy the Additional Page, numbering the entries consecutively. Attach the Additional Page to this page.

1. Do you have any codebtors?

- ☐ No. Check this box and submit this form to the court with the debtor's other schedules. Nothing else needs to be reported on this form.
- ☒ Yes

2. In Column 1, list as codebtors all of the people or entities who are also liable for any debts listed by the debtor in the schedules of creditors, Schedules D-G. Include all guarantors and co-obligors. In Column 2, identify the creditor to whom the debt is owed and each schedule on which the creditor is listed. If the codebtor is liable on a debt to more than one creditor, list each creditor separately in Column 2.

*Column 1: Codebtor**Column 2: Creditor***Name****Mailing Address****Name***Check all schedules that apply:***2.1 Brian Nelson****130 Vantis Drive, Suite 160
Aliso Viejo, CA 92656****Fannie Mae**
☒ D _____
☐ E/F _____
☐ G _____
**2.2 Nelson Brothers
Professional
Real Estate, LLC****180 Avenida La Pata, 2nd Floor
San Clemente, CA 92673****Fannie Mae**
☒ D _____
☐ E/F _____
☐ G _____
2.3 Patrick Nelson**104 Via Almodover
San Clemente, CA 92672****Fannie Mae**
☒ D _____
☐ E/F _____
☐ G _____

Debtor **NB Vue Mac DST**
Name

Case number (if known) **21-32291**

Fill in this information to identify the case:Debtor name **NB Vue Mac DST**United States Bankruptcy Court for the: **SOUTHERN DISTRICT OF TEXAS**Case number (if known) **21-32291**☐ Check if this is an amended filing**Official Form 206Sum****Summary of Assets and Liabilities for Non-Individuals****12/15****Part 1: Summary of Assets****1. Schedule A/B: Assets-Real and Personal Property** (Official Form 206A/B)**1a. Real property:**Copy line 88 from *Schedule A/B*..... \$ **36,300,000.00****1b. Total personal property:**Copy line 91A from *Schedule A/B*..... \$ **1,022,494.16****1c. Total of all property:**Copy line 92 from *Schedule A/B*..... \$ **37,322,494.16****Part 2: Summary of Liabilities****2. Schedule D: Creditors Who Have Claims Secured by Property** (Official Form 206D)Copy the total dollar amount listed in Column A, *Amount of claim*, from line 3 of *Schedule D*..... \$ **23,265,000.00****3. Schedule E/F: Creditors Who Have Unsecured Claims** (Official Form 206E/F)**3a. Total claim amounts of priority unsecured claims:**Copy the total claims from Part 1 from line 5a of *Schedule E/F*..... \$ **Unknown****3b. Total amount of claims of nonpriority amount of unsecured claims:**Copy the total of the amount of claims from Part 2 from line 5b of *Schedule E/F*..... +\$ **446,746.00****4. Total liabilities**
Lines 2 + 3a + 3b\$ **23,711,746.00**

Fill in this information to identify the case:Debtor name **NB Vue Mac DST**United States Bankruptcy Court for the: SOUTHERN DISTRICT OF TEXASCase number (if known) **21-32291**☐ Check if this is an amended filing

Official Form 202

Declaration Under Penalty of Perjury for Non-Individual Debtors

12/15

An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Declaration and signature

I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.

I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

- ☒ *Schedule A/B: Assets—Real and Personal Property* (Official Form 206A/B)
- ☒ *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 206D)
- ☒ *Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 206E/F)
- ☒ *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G)
- ☒ *Schedule H: Codebtors* (Official Form 206H)
- ☒ *Summary of Assets and Liabilities for Non-Individuals* (Official Form 206Sum)
- ☐ Amended Schedule _____
- ☐ Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders (Official Form 204)
- ☐ Other document that requires a declaration _____

I declare under penalty of perjury that the foregoing is true and correct.

Executed on **August 3, 2021****X /s/ Patrick Nelson**

Signature of individual signing on behalf of debtor

Patrick Nelson

Printed name

Authorized Representative

Position or relationship to debtor